

NATIONAL HEART FORUM'S RESPONSE TO THE CHILDREN AND YOUNG PEOPLE'S UNIT CONSULTATION DOCUMENT: BUILDING A STRATEGY FOR CHILDREN AND YOUNG PEOPLE

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ABOUT THE NATIONAL HEART FORUM

The National Heart Forum (NHF) is the UK alliance of over 40 national organisations working to reduce the risk of coronary heart disease in the UK. Member organisations represent the medical and health services, professional bodies, consumer groups and voluntary organisations. Members also include many individual experts in cardiovascular research. Government departments have observer status.

The purpose of the NHF is to work with and through its members to prevent disability and death from coronary heart disease in the UK. In order to achieve this, the National Heart Forum has four main objectives:

To provide a forum for members for the exchange of information, ideas and initiatives on coronary heart disease prevention

To identify and address areas of consensus and controversy

To develop policy based on evidence and on the views of member organisations

To stimulate and promote effective action.

The NHF embraces professional, scientific and policy opinion on current issues in coronary heart disease prevention. It co-ordinates action to reduce heart disease risk through information, education, research, policy development and advocacy.

PART ONE: OUR VISION

Question I

Do you share the government's vision for all children and young people?

The National Heart Forum shares the government's vision for all children and young people. The nine points listed under the vision all contribute to maintaining, building and protecting the health and well being of children and young people - which is a stated aspirational outcome of the strategy. By maintaining and building health and well-being in childhood individuals can be protected against premature morbidity (and mortality) from avoidable heart disease, cancer, diabetes and stroke - the leading causes of death and disability before the age of 65 in the UK. Good health and well-being allows children and young people to fulfil their potential and improve their social and educational outcomes.

Question 2 Do you think this vision could be improved?

The vision should incorporate a tenth strand making the health and well-being of children and young people central to the strategy. The strategy's outcomes framework has been developed to maintain core government policy on reducing poverty and tackling inequalities (p18) - which have a clear impact on health and well being. Even though these are outcome aspirations, the National Heart Forum strongly believes that these should be within the stated vision of the strategy.

The tenth strand might read:

"We want all of our children and young people to be assured of: the opportunity to develop healthy lifestyles so that they may achieve optimum health and well-being both in childhood and in later life."

The health and well-being of children and young people is comprehensively addressed in the NHF $\sqrt{10} \sqrt{10} \sqrt{10}$

The National Heart Forum strongly recommends that the Children and Young People's Unit look closely at the young@heart framework and use it as a model for the strategy. The NHF and our members would be delighted to discuss or present the young@heart framework to the Unit in more detail and will be writing to you separately about this. A copy of the report young@heart: towards a generation free from coronary heart disease is enclosed.

The full research reviews of evidence on which the young@heart framework of recommendations is based will be published later in the year. Further information can be found on the NHF website: www.heartforum.org.uk.

Question 3 Do you support the principles for all policies for children and young people?

The National Heart Forum supports the principles underpinning the strategy, with the exception of principle 7 *results orientated and evidence based*. While the NHF hold the highest regard for quality research, evaluation, monitoring and review, and fully agree that decisions that affect children and young people must be well informed; we believe in some instances the precautionary principle should be used as a basis for policy action where cause and effect may not be fully established but where there is a good case and sufficient support for policy action - in many cases this can be seen as 'just common sense'. A possible example where the NHF believes the precautionary principle should apply is in the restriction of commercial practices by fast food and snack food manufacturers in schools. The NHF's young@heart policy framework recommends that measures should be introduced to limit and control promotions in schools.

Question 4 Do you think these principles could be improved?

The NHF believes that the principles would be greatly enhanced by adding a further principle: To enhance and sustain health; policy and services for children should seek long term change for sustainable, lifelong health improvement through an approach that promotes health for young people and protects against the development of avoidable ill health. There should be a focus on building health throughout life.

Question 5 How do you think these principles should be publicised?

These principles should be integrated into the training, and know-how, of all those working with children, young people and families, or in areas which impact on the lives of children and young people - including all public sector workers. Basic teacher training should also include these principles and a health promotion component.

These principles should be integrated into the National Healthy School Standard, which young@heart recommends should be strengthened and new resources provided to enable and encourage all schools to meet an enhanced national Standard. Meeting the new Standard should be included within the statutory inspection remit of Her Majesty's Inspectorate for Schools.

These principles must also be integrated into the policy making process throughout government.

Question 6

What difficulties would services face in order to fully commit to these principles?

In order to fully commit to these principles professionals/the workforce in this area will need to be convinced of their validity. This will in part be dependent on the awareness raising of the principles (see 5). It may be that due to workload pressure, services will only commit where there is individual drive. The National Heart Forum suggests that some system is implemented to require services to adhere to these principles.

Access to resources at a local level will make it difficult to fully commit to the principles. Resources should be specially ring-fenced to ensure adherence. However practical support should be offered through sharing good practice in the UK and lessons learned from abroad. The government should implement a programme to support this information exchange. Guidance in the form of tool-kits, for example, should be developed and disseminated. The Health Development Agency and the IDeA would be ideally placed to develop such guidance and advice.

PART THREE: IMPROVING OUTCOMES FOR CHILDREN AND YOUNG PEOPLE

Question 7 Do you think the new outcomes based approach is right?

The NHF believes that this outcomes approach is a rational way to develop the strategy and we fully support the outcomes listed. We are particularly pleased to see health and wellbeing as a key outcome for the strategy. However, as well as being a key outcome we believe that health and well being should be part of the strategy's vision - it should be a means to an end as well as an end in itself; in maintaining and promoting health and wellbeing in childhood we can protect health in adulthood. The NHF also believes that health and well-being must be an underpinning principle for the strategy (see answer 2).

Question 10 Do you think the proposed outcomes could be improved?

Health and well-being outcome

Regarding the aspirations for health and well-being outcome the NHF urges that health promotion and health protection policies - in schools and the community - should be added to this category rather than just focusing on preventative and treatment services.

Given that the strategy seeks to achieve the government's targets of reducing child poverty and health inequalities the NHF suggests that these both be set out as specific outcomes.

Protection outcome

Health protection should be included in this category. This could be measured protection from undue commercial influences - from the food and tobacco industries - which may damage health.

The NHF's young@heart policy framework recommends that there should be a national inquiry to look at the impact of advertising and commercial promotions on family and child health. This should focus in particular on the food and tobacco industries, and be the basis for developing appropriate interventions such as advertising regulations. The CYPU is ideally placed to play a key role in implementing such an inquiry.

Responsibility outcome

Children and young people should be able to live in a healthy environment and be given the information and support to make healthy informed choices, and have the opportunity to seek help and advice on health and well-being issues. Outcome measures could include increased use of leisure facilities and the decline in smoking levels, this would also promote responsible health behaviour to children and young people.

A key recommendation of the NHF's young@heart policy framework is that there should be government investment and local action to ensure national provision of support and mentoring services for teenagers which incorporates a health and well-being element. The Connexions service in England should be expanded and should act as a model for other national services. Once implemented, such an initiative would underpin the Strategy and play a large role in helping achieve this and many of the other outcomes, particularly achievement and enjoyment outcome.

Question 9

Do you agree with these goals for monitoring outcomes for children and young people?

The NHF are in agreement with the goals for monitoring but we suggest that you add physical activity levels as further monitoring criteria for the health and well-being outcome, in addition to it being a measurement for the achievement and enjoyment outcome.

The NHF recommend that the outcomes should be measured in both the long and short term. Although life expectancy is included as a measurement, sustained good health in adulthood is a key measure of success.

Question 11 Who should be responsible for delivering improved outcomes in communities.

The NHF believe that the following people should be responsible for delivering improved outcomes:

All professionals working with children and families

Children's co-ordinator positions should be created in all local authorities to co-ordinate action and take a lead role in implementing the Children's Local Strategic Partnership, a proposal that the NHF warmly welcomes. (Co-ordinators should remain distinct from directors for children's rights, who will focus on services).

National Healthy Schools Standards co-ordinators

Question 12

Do you agree that we should be working towards more local control of planning for children and young people's services?

The NHF support local control of planning as it can better deliver appropriate services. However, in order to ensure implementation and adherence to the principles of the Strategy, the government should take the lead by playing a key co-ordinating role.

Central to the NHF's young@heart recommendations is that a national plan for children and young people's health and well-being be implemented to co-ordinate action across government to address the wider determinates of health. Young@heart is a blueprint for such a plan and highlight six key areas for action:

End child and family poverty

Make every school a healthy school

Build healthy communities

Strengthen and expand public health roles

Secure corporate responsibility for health

Give a voice to children and young people.

Question 13 Do you agree that we should monitor progress in meeting the aims of the Strategy through a State of the Nation's Children and Young People's report?

Yes, the National Heart Forum fully supports the proposals for the CYPU to report regularly through a State of the Nation's Children and Young People's report. Indeed, the NHF's young@heart policy framework recommends that child and youth health and wellbeing targets and indicators should be included in the annual reports of directors of public health and that LSP and children's LSPs should be required to act upon these. The reports should be made available to all professionals and others working with families, children and young people.

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